

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	OK		8.22.01
O.I.P.E. CLASSIFIER		10	7-2-01
FORMALITY REVIEW	Em	927	08/10/01
RESPONSE FORMALITY REVIEW	ET	1018	11/13/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	08/22/01
2	08/22/01
3	08/22/01
4	08/22/01
5	08/22/01
6	08/22/01
7	08/22/01
8	08/22/01
9	08/22/01
10	08/22/01
11	08/22/01
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43	08/22/01
44	08/22/01
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47	08/22/01
48	08/22/01
49	08/22/01
50	08/22/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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2856  
 08-10-01  
 617  
 11-13-01